

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

Inspection Date	
Time Start	11:20 am
Time Finish	12:35 pm

## HAZARDOUS WASTE INSPECTION REPORT GENERATOR S Q GENERATOR

Company name	B. Braun Medicel Inc.	I.D. Number	PAD 9	982679169	
	901 Marcon Blvd.				
	Lehigh Municipality				
	Chris Smolar				
Name & Title of Responsil	ble Official Steve Stanci	ick Enviror	nmental, Health, a	and Safety Manager	
Person Interviewed	David Lauer / Joe Patterson	Telephone (610) 2	66-0500 x2584 /	x2454	
	nt from above)			Carlo de la Carlo	
Amount of Hazardous Wa	ste Generated per Month:	>2200 Po	ounds	Kgs	
1. Site Characterization					
STORAGE: 🖂 Co	ntainer 🔲 Tanks 🔲 Con	tainment Bldg.  Dri	in Pad Other		
	utralization/WWTP    Rec				
	MENT Containers				
	Large Quantity Handler			g	
	Types Fluorescent Lar		ididici		
3. Hazardous Waste Tra		пра		F. LECT.	
	Freehold Cartage		icense Number	DA AU 0067	
			License Number PA-AH 0219  License Number PA-AH 0172		
				PA-AH 0172	
4. Types of flazardous	waste generated and destin	ation facility (location	on & type).		
Waste Code	Waste Description		Destina	tion Facility	
D001, F002, F003	Waste flammable solids and liquids (solvents)		Environmental		
D001, F002, F003	Waste flammable solids and liquids (solvents)		Von Roll of Am	erica	
D001, D002, F002	01, D002, F002 Lab Wastes		Permafix		
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EPA - RCRA

Municipality – Hanover Twp. Facility – B. Braun Medical

### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

## HAZARDOUS WASTE INSPECTION REPORT GENERATORS -- SMALL QUANTITY GENERATORS

Site Name B. Braun Medical, Inc. ID Number PAD 982679169 Date 12/10/02 1 - No Violation Observed 2 - Not Applicable 3 - Not Determined 4 - Non Compliance **STATUS** 1 2 3 4 REQUIREMENT PA CIT. FED. CIT. LINE NO. 25 PA Code 40 CFR Hazardous waste determination performed on all waste 262a 10 262.11 H001 streams 1 Identification Number 262a.10 262.12 H002 1 Authorized transporters only 262a.10 262.12(c) H003 1 Subsequent notification requirements met 262a.12(b) H004 1 Proper manifest used 262a.10 262.21 H005 1 Manifests filled out correctly and completely 262a.20 H006 1 Manifests signed and routed properly 262a.23(a) 262.23 H007

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

# HAZARDOUS WASTE INSPECTION REPORT GENERATORS -- SMALL QUANTITY GENERATORS FACILITY SPECIFICS

Site Name B. Braun Medical, I	nc. ID Number	PAD 982679169	_ Date	07/12/02
1 - No Violation Observed	2 - Not Applicable	3 - Not Determined	4 - Non Co	mpliance

1 2 3	4 REQUIREMENT	PA CIT. 25 PA Code	FED CIT. 40 CFR	LINE NO.
	CONTAINERS (Subchapter I)			
1	Containers managed in compliance with 40 CFR Part 265 Subpart I and 25 PA Code Chapter 265a Subchapter I	262a.10	262.34	H025
1	Containers of hazardous waste in good condition	265a.1	265.171	H026
1	Containers and stored waste compatible	265a.1	265.172	H027
1	Containers kept closed except during addition or removal of wastes	265a.1	265.173(a)	H028
1	Containers managed to prevent leaks	265a.1	265.173(b)	H029
1	Container configuration and spacing insures safe management and access for inspection purposes and emergency equipment	265a.173		H030
1	Container storage areas inspected at least weekly	265a.1	265.174	H031
1	Special requirements for ignitable or reactive and incompatible waste complied with	265a.1	265.176-177	H032
1	Proper containment and collection systems in place	265a.179		H033
1	Air emission standards complied with (AA, BB, CC)	265a.1	265.178	H034
	Containers clearly marked with accumulation date and visible for inspection	262a.10	262.34(a)(2)	H035
1	Containers labeled "Hazardous Waste"	262a.10	262.34(a)(3)	H036
1	Containers labeled accurately identify contents	SWMA 6018.403(b) (2)		H037

ER-WM-129: Rev. 12/93

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

### **INSPECTION REPORT COMMENTS**

Date of inspection	December 10, 2002	Identification Number	PAD 982679169
Company/Facility/Site Name	B. Braun M	edical, Inc.	
Inc. Steve Stancick, David inspection began at 11:20 at	Lauer and Joe Patterson or m.	or inspection on 12/10/02 at B. f B. Braun were present during  The facility generates hazardo	the inspection. The
wastes during this process. also generates lab waste. T	The facility main generate he facility's hazardous was ol, Butyl Acetate, TCE, and	es used solvents as hazardous veste include, but are not limited de Phenol. The facility generated	vaste. The facility to, Isopropanol,
was properly labeled and hawaste storage area also had	nd secondary containment. one drum. The drum was bleaks were observed. No	ed in the satellite accumulation.  The drum was in good condition properly labeled, had a start date liquid was seen in the secondary.	ion. The hazardous ate and proper
One of the lab areas container and has a log sheet	-	waste is generated here. The fed into the lab pack.	acility labels the
appear to be in order. The factorial appear to be in order. The factorial appears to be appeared to the factorial appears to be appeared to the factorial appears to the factorial appears to the factorial appears to be appeared to the factorial appears to the factorial appears to be in order. The factorial appears to be in order. The factorial appears to be in order.	acility just had a pick up or ardous waste handling was	s to be adequate. Manifests was 12/8/02. The training documes completed in October 2002. Her. Some of the facility's was	ents were The facility's
No violations were 1	noted during the inspection		
formal notification of any violations violations noted herein, or other violat	observed during the inspection. A tions identified as a result of review tute an order or other appealable ac	on conducted by a representative of the Additional notification of violations may be of laboratory analyses or Department rec tion of the Department. Nothing containe	pe issued concerning either ords.
	terviewed does not necessarily impl	y concurrence with the findings on this reson.	eport, but does acknowledge
Person interviewed (signatu	re)	Da	ate
I		Da	

Handler ID Number		RCRA Non-Not	Ifier YES [	] NO [X]	
PAD 982679	1:6:91	YES, the handler	section must be	completed.	
andler Name B. Bravn	Medica	1, In			1.0 880
reet 901 Marcen	Blud				
* Allentawn		States PA	ZIp.C	ode 181	09
unty or County Code	7		Contact		The state of the s
VERSE CHANGE REQUIRED	YES ! NO	2-[X] xor	indicate Universe St	the of the RCRA No	on-Hottfler:
Indicate the facility's current Universe(s):	III. I	Indicate the new tr			-Transporter [ ]
ndicate the new RCRIS Generator Universe:		You must check at le	THURS I HERE	Check this bo	ox if the facilitiy is d-in RCRIS as a
	EG []	Mark Mode of Transpo	ortation [ ] Water	transporter a	
TE: All TSD activations changes must be handled by the state data coordinator and cannot be made using this from		[ ] Rail [ ] Highway	Other		
ALUATION Add Char	nge Delete			1000	HARMER
Date Number	Agency	C.E.I	Reason	Branch	Person P.A.C.S.S
AREAS OF EVALUATION	( E - Evaluate			A - Not App	
GGR E GSC TWD	DGW	DOR	DWP	BRR	FEA
GLB Z GSQ DCH	DLB	DPB	DIN	BPS	css
GMR GEX DCL	DLF	DPP	DIA	BIS	UOR
GOR E TGR DCP	DLT	DSI	DPS	BCE	scc
GPT P TMR DFR	DMC	DTR :	DOP	BDT	
GRR F TOR DGS	DMR	DTT	DMI	_ CAS	29411 27 13
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Date Determined Priorit		Person			
comments			R. I.T.		

Handles ID Number Handle Ham	U//9/ VERSION
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FORCEMENT Add Change Delete	
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[ ] [ \$ : : : : : : : : : : : : : : : : : :	Multimedia Enforcement Codes (Place an 'X' next to all that apply)
e :	L AIR L UST
	L EPCRA UIC WATER
TE: To record activities for Supplemental vironmental vironmental Projects (SEPs) or to add penalty payment promation, use the Supplemental Enforcement Form.	SPCC WETLANDS LI TSCA PCB
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acy Ni	Agency Number Area Date Determined
	Date Determined

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### Pennsylvania Department of Environmental Protection

#### 4530 Bath Pike Bethlehem, PA 18017 December 13, 2002

**Bethlehem District Office** 

(610) 861-2070 FAX (610) 861-2072

Hanover Township Municipal Building 2202 Grove Road Allentown, PA 18109

RE:

B. Braun Medical, Inc.

Hanover Township Lehigh County

Dear Mr. Pudliner:

Please find enclosed a copy of the report of an inspection performed by this District Office at B. Braun Medical, Inc. located in your municipality. A copy of the inspection report is being provided to you pursuant to the provisions of Section 1101(a)(1) of Act 101, the Municipal Waste Planning, Recycling and Waste Reduction Act of 1988.

Sincerely,

Christopher Smolar Solid Waste Specialist

Waste Management Program

Christopher Smalar

Enclosure

SP/gh



### Pennsylvania Department of Environmental Protection

4530 Bath Pike Bethlehem, PA 18017 December 13, 2002

Bethlehem District Office

(610) 861-2070 FAX (610) 861-2072

Lower Saucon Township Supervisors 3700 Old Philadelphia Pike Bethlehem, PA 18015

Attention: Mr. J. Layne Turner

RE:

Eastern Waste of Bethlehem, Inc. Landfill

I.D. #100020

Lower Saucon Township **Northampton County** 

Dear Mr. Turner:

Please find enclosed a copy of the report of an inspection performed by this District Office at the Eastern Waste of Bethlehem, Inc. Landfill, located in your municipality. A copy of the inspection report is being provided to you pursuant to the provisions of Section 1101(a)(1) of Act 101, the Municipal Waste Planning, Recycling and Waste Reduction Act of 1988.

Sincerely,

Christopher Smolar

Waste Management Specialist

Christopher Smalar

Waste Management Program

Enclosure CS/gh

